

# A Personalized Approach to Asthma: The New Asthma Treatment Guidelines Project ID: 4913ES 13

*If you wish to receive acknowledgment for completing this activity,  
please complete posttest and contact information and return appropriate pages to  
Postgraduate Institute for Medicine via fax (303-790-4876).*

Name \_\_\_\_\_ Degree \_\_\_\_\_

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To assist us in evaluating the effectiveness of this activity and to make recommendations for future educational offerings, please take a few minutes to complete this evaluation form.

**Please answer the following questions by circling the appropriate rating:**

1 = Strongly Disagree    2 = Disagree    3 = Neutral    4 = Agree    5 = Strongly Agree

**Extent to Which Program Activities Met the Identified Objectives**

*After completing this activity, I am now better able to:*

- Review the latest asthma treatment guidelines in clinical practice  
1 2 3 4 5
- Identify the risk of asthma exacerbations in mild, persistent asthma patients  
1 2 3 4 5
- Explain the importance of continual assessment of response to therapy for patients with persistent asthma  
1 2 3 4 5
- Specify the primacy of ICS for mild persistent and moderate persistent asthma  
1 2 3 4 5
- Recall the recommendations regarding the use of combination therapy (ICS-LABA) in mild, moderate, and severe persistent asthma  
1 2 3 4 5

**Teaching Effectiveness of the Individual Faculty Members**

Speakers	Effective in Presenting the Material	Avoided Commercial Bias or Influence
Gene L. Colice, MD, FCCP	1 2 3 4 5	1 2 3 4 5

**Overall Effectiveness of the Activity**

*The content presented:*

Was timely and will influence how I practice	1	2	3	4	5
Enhanced my current knowledge base	1	2	3	4	5
Addressed my most pressing questions	1	2	3	4	5
Provided new ideas or information I expect to use	1	2	3	4	5
Addressed competencies identified by my specialty	1	2	3	4	5
Avoided commercial bias or influence	1	2	3	4	5

**Impact of the Activity**

Name one thing you intend to change in your practice as a result of completing this activity:

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Please list any topics you would like to see addressed in future educational activities:

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Additional comments about this activity:

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**Follow-up**

As part of our continuous quality improvement effort, we conduct postactivity follow-up surveys to assess the impact of our educational interventions on professional practice. Please indicate if you would be willing to participate in such a survey:

- Yes, I would be interested in participating in a follow-up survey.
- No, I'm not interested in participating in a follow-up survey.

**For Physicians Only**

I certify my actual time spent to complete this educational activity to be:

- I participated in the entire activity and claim 2.0 credits.
- I participated in only part of the activity and claim \_\_\_\_\_ credits.

**Posttest Answer Key – fill-out answers here to participate in posttest.**

1	2	3	4	5	6	7	8	9	10	11	12

**1) Which of the following are correct?**

- a) During home management, exacerbations, one of the recommendations is to double the dose of ICS
- b) Levalbuterol is preferred over albuterol as a rescue medication
- c) Impratropium is 2nd line therapy for both home and hospital based management of asthma
- d) All of the above are false

**2) In the assessment of HPA axis function, which of the following is considered the most sensitive measure?**

- a) An integrated 24 h AUC
- b) Adrenocorticotrophic hormone stimulated cortisol
- c) An integrated 12 h AUC
- d) All are among the most sensitive measures

**3) While classifying severity in patients  $\leq 4$  years not taking long term controller medications, which of the following do not meet the criteria for intermittent disease?**

- a) Symptoms  $\leq 2$  d/week
- b) SABA use  $\leq 2$  d/week
- c) Exacerbations  $\leq 2$  x/year
- d) All of the above are correct

**4) According to the EPR3 guidelines, which of the following treatments are recommended in patients with a progressive loss of lung growth?**

- a) Patients should be treated with high dose steroids
- b) Exacerbations  $\leq 1$ x/year will reduce the risk of progression
- c) The guidelines do not recommend choices a or b for the management of patients with progressive loss of lung function
- d) Choices a and b are recommended in the guidelines

**5) Which of the following statements about omalizumab are false?**

- a) In children ages 5-11, omalizumab is recommended as alternative therapy in step 5
- b) In adolescent and adults  $12 \geq$  , omalizumab is recommended as first line therapy in step 6
- c) In adolescent and adults  $12 \geq$  , omalizumab is recommended as alternative therapy in step 4
- d) All are false

**6) Which of the following ICSs have the smallest mass median airway diameter?**

- a) Ciclesonide HFA
- b) Beclomethasone dipropionate HFA
- c) Fluticasone propionate CFC
- d) Fluticasone propionate DPI

**7) Which parameter demonstrates the greatest disparity between stable and unstable asthma patients?**

- a) FEV1
- b) Functional residual capacity
- c) Closing volume/vital capacity
- d) Closing capacity/total lung capacity

**8) Which of the following is false regarding long-term controllers and the level of evidence supporting their use?**

- a) Omalizumab Level A
- b) Cromolyn, Nedocromil Level A
- c) Omalizumab Level B
- d) Methylxanthines Level B

**9) Which of the following are correct?**

- a) ICSs are preferred monotherapy for controller therapy in patients with persistent asthma, across all ages
- b) LABAs are preferred adjunctive agents in patients aged  $\geq 12$  years who cannot be controlled with ICS monotherapy
- c) Anti-IgE therapy should be considered for patients who remain uncontrolled and who have allergic asthma
- d) All are correct

**10) Key elements in the assessment of impairment include which of the following?**

- a) Current pulmonary function
- b) Physical activity
- c) Need for rescue medications in the past 2-4 weeks
- d) All are correct

**11) Which of the following is correct in asthma patients on controller medications?**

- a) Severity is based on the lowest step required to maintain clinical control
- b) Validated questionnaires may be used in patients aged  $\leq 12$
- c) Level of control is based on the least severe impairment or risk category
- d) All are incorrect

**12) Which of the following is correct with regard to the role of ICSs in asthma?**

- a) Improve lung function
- b) Reduce symptoms and exacerbations
- c) Decrease the need for bronchodilator rescue
- d) All are correct